

Educational Action on Hand Hygiene to Combat Intestinal Parasitosis in a Public School in Belém of Pará Brazil

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Abstract— Enteroparasitosis is a serious public health problem, the main factor being lack of knowledge about preventive measures, especially among the most neglected populations, which is a condition for the dissemination of enteroparasitosis. Therefore, it is essential to know the behavior and degree of knowledge of people in relation to the subject, since the information obtained is fundamental for the preparation of actions and intervention programs. The objective is to carry out an educational action in a public school, on the hygienization of the hands to combat intestinal parasitosis. It is a descriptive study, of the type report of experience, developed by academics of the medicine course of the Federal University of Pará, in a public school, with two classes of infantile education, in two stages, a video was presented on the subject, and soon the hand washing was carried out for a certain period, with the objective of teaching the children the appropriate technique of hand washing. The involvement of the students was visible. Realizing that the main objective, which was to sensitize children to adopt hygiene habits in daily life was achieved and thus influence the prevention of intestinal parasitosis. It was concluded that school is the ideal environment for the practice of health education, and has the potential to have a real impact on the problem on board, since it stimulates critical thinking, resulting in the reduction of illnesses, morbidity and mortality.

Keywords— Intestinal parasitosis; Hygiene of the hands; Health Education.

I. INTRODUCTION

The Family Health Strategy (FHS) of the Riacho Doce, in the Guamá neighborhood in the municipality of Belém, State of Pará, is a field of practice for the Federal University of Pará in the area of integrated health care, and based on this partnership served as a basis for identifying

relevant problems and implementing health promotion measures. It should be noted that this community has a lack of infrastructure to ensure a preventive health quality, since the lack of garbage collection, water supply, inadequate sanitary conditions and housing, all these social determinants in health are unfavorable for life in society

and more conducive to the emergence of diseases (Carrapato, Correia, & Garcia, 2017)..

The activities of home visits by community health workers, nurses and doctors have made it possible to perceive that the greatest health problems in this locality involve violence in general and chronic diseases. However, what was most evident in academics and professionals were the high rates of parasitosis in all age groups, especially in children. It is clear that these parasitosis are directly related to the environment in which the individual lives, degree of knowledge about health education and water quality that is made available, these factors are determinants for infection (Garbossa et al., 2013).

In this way, social institutions, when encouraged to participate actively in health actions, develop co-responsibility with health teams, allowing interaction with greater scope in the face of health demand (Silva et al., 2018). The lack of knowledge about preventive measures, especially among the most neglected populations, is a condition for the dissemination of enteroparasitosis. therefore, it is essential to know the behavior and degree of knowledge of people in relation to the subject, since the information obtained is fundamental for the development of actions and intervention programs (Busato, Dondoni, Rinaldi, & Ferraz, 2015).

Thus, when it comes to promoting health in the school environment, this reality seems distant because it is not treated in a timely and consistent manner. In this sense, health education is one of the essential components for monitoring the student's school development and should be experienced by the university and FHS (Ferrari de Lima, Malacarne, & Strieder, 2012).

According to the scenario we are experiencing, the development of health education actions is justified, addressing as an instrument the Arc of Maguerez, which consists of working from the problematization of the community. This theme approaches the construction of active learning from some stages, such as: observation of reality; identification of problems; theorization; hypothesis of solution and execution of action (Prado, Velho, Espíndola, Sobrinho, & Backes, 2012).

Based on the problems observed by the community, there was a need to intervene through a health education project entitled "Clean hands in combating intestinal parasitosis: a measure based on the Maguerez arch". This study is a report of experience in a public school in Belém, relating the prevention of intestinal parasitosis with healthy hygiene habits through the washing of hands.

Within this perspective, the general proposal from this work was to carry out an educational action on the

prevention of intestinal parasitosis at school, with a focus on the hygienization of the hands, in order to address this practice in the student's school experience. To insert a practical knowledge of the medicine course of the Federal University of Pará in relation to the hygienization of the hands in the daily life of the child; to sensitize the school of the importance of inserting the education in health in the school activities of the child; to strengthen the habit of hand washing in the daily life of the child to prevent infections by parasitosis.

II. MATERIALS AND METHODS

This is a descriptive study, which addresses a report of experience with health education, carried out at the Edson Luiz Elementary School, located at Rua Barão of Igarapé Miri in the Riacho doce community, Guamá, Belém, State of Pará-Brazil. The work was developed by a group of 08 academics of the 3rd semester of the medicine course of the Federal University of Pará, in partnership with the ESF of the Riacho Doce.

The work proposal was presented to the school management and it was defined that the participants would be children aged 05 and 10. Two classes were selected to be implemented as a pilot, one of infant education II, with 27 students and another of primary education with 30 students. The activities were developed in the month of November 2018 in that school.

The method used was the participatory type, allowing greater interactivity between students and facilitators and thus the activities became dynamic, because the children had the opportunity to reproduce the learning. The technique approached was hand sanitizing, based on the hand sanitizing manual in health services of the National Health Surveillance Agency Anvisa, (2019), being adapted to the reality of the children's audience.

First, it was worked with the two classes separately with a video presentation, entitled "The Adventures of Super Soap in Fighting Parasites", in order to make them aware of the importance of hand washing; (<https://www.youtube.com/watch?v=H1NO1VPRsEM>), Then face towels were distributed individually; followed by the practical applicability of the technique, using liquid soap made and supplied by the academics every week until the conclusion of the work. These activities were followed weekly by the group of the Federal University of Pará and daily by the professor of the institution where the project took place.

Another strategy adopted was the elaboration of an invitation letter to local businesses to participate in the project, with the contribution of soaps to manufacture the product; to parents or guardians a Free and Informed Consent Term was elaborated in order to allow the

participation of students in the project and through an invitation letter to encourage the children to wash their hands whenever necessary and send to school the clean towel to be used in the child's daily life. In addition, a server of the institution was directed to make the liquid soap, with the support of local partners and the direction of the school was delivered some soaps to continue the project.

During the week, the teacher of the institution followed these activities, always remembering the importance of washing hands and approaching with themes in class. On the other hand, every Wednesday in November, the academics monitored the hand hygiene activities and the replacement of the liquid soap. Always observing the technique taught and correcting faults and in conversation with the children wondered if they were doing the activities in their homes.

For the theoretical support, it was based on two studies relevant to the reflection of the authors, being: "The role of the school in health promotion: a necessary mediation" by Dartel Ferrari de Lima; Dulce Maria Strieder and Vilmar Malacarne of 2012 and "the arc of Charles Margueres: reflecting strategies of active methodology in the formation of health professionals" by Marta Lenise do Prado et al, 2012.

III. RESULTS AND DISCUSSION

Within this perspective that was proposed by the group, the involvement of the students was visible. Realizing that the main objective, which was to sensitize children to adopt hygiene habits in daily life was achieved and thus influence the prevention of intestinal parasitosis.

The dynamics allowed the child's participation in the actions and their ability to learn new things in both groups. Since the students of Early Childhood Education performed with ease the hygienization of the hands, they were easier to work with during the practices, but had a certain dependence and need monitoring, in this group the interest of parents in the activity that favors their children's health was more accepted.

In relation to primary education, they also had ease in applying the correct practice, more independence and organized in relation to the materials, but had a certain difficulty in organizing during the practice.

In this context, intestinal parasitosis represents a worldwide public health problem, and is responsible for high morbidity rates, as well as, these diseases are related to sanitary conditions and have high prevalence in Brazil, affecting mainly school-age children, related to their precarious hygiene habits and their developing immunity. Intestinal parasitosis is caused by protozoa and helminths, representing a serious problem for the health of children

and adults, and can cause changes in physiological processes (Rodrigues, Lima, Pereira, & Catunda, 2019).

The most important intestinal protozooses and helminthes in Brazil are: amebiasis, balantidiasis, trichomoniasis, schistosomiasis, himenolepiasis, teniasis, hookworm, ascaridiasis, enterobiasis and strongyloidiasis. Lack of hygiene may be one of the high occurrence related factors demonstrated from examinations performed in the community, since all intestinal parasites detected can be transmitted by factors such as: lack of hygiene, contaminated water and food and other factors that contribute to the spread of these parasitosis. However, in order to eradicate this problem, improvements in socioeconomic conditions, basic sanitation and health education are needed, as well as changes in cultural habits (Visser, Giatti, de Carvalho, & Guerreiro, 2011).

The occurrence of intestinal parasites has an important relationship with unsatisfactory sanitation, as well as inadequate hygiene practices in the population. The low quality of living conditions and poor or even non-existent basic sanitation, the lack of knowledge of the population about the transmission and control of these infections and principles of personal hygiene and care in the correct handling of food also contribute to the increase in the occurrence of enteroparasitosis. However, control actions still present barriers to basic sanitation infrastructure, as well as the lack of community-based educational projects (Faria, 2015).

In this context, health education is a fundamental tool in the face of this problem and is a very effective strategy to address the issue of intestinal parasitosis, since it facilitates learning and promotes an improvement in the health of individuals, since the knowledge built through it can help in prevention (Bragagnollo et al., 2018).

Health Education aims at the prevention of illnesses, seeking to impact the change of behavior through the stimulation of a critical conscience. In this sense, it seeks that the individual himself guarantees the maintenance, acquisition and promotion of his health. It should be planned as a process capable of impacting on people the critical awareness of the real causes of their problems and, at the same time, create a readiness to act towards change (Gomes et al., 2016).

In this way, health education, besides being a low-cost strategy, is still able to achieve significant and lasting results in intestinal parasitosis control. Studies confirm that educational practices are as effective as basic sanitation, and even superior to long-term mass treatment, with educational action being a recommended type of intervention in both high and low endemic populations (Toscani et al., 2007).

The school constitutes a privileged space for social interactions, presenting beliefs and cultural values characteristic of its environment. In order to achieve that students are able to intervene in the maintenance and improvement of their health conditions and the community where they live (Sunardi & Yuliati, 2018)

In this sense, it is essential that students build the knowledge necessary to obtain such behaviours. Therefore, it is recognized the important role of the school in contributing to an effective health education, and it is suggested to continuously rethink the pedagogical practices adopted in order to better meet the needs of the subjects involved (Ribeiro & Messias, 2017).

In this way, it is emphasized that the role of the school has been increasingly important in the development of healthy habits. In this environment, it is necessary to have space for educators and students to discuss health issues, however, to achieve this, it is fundamental that educators have adequate training and knowledge. Thus, continuing education for teachers or improving the access of health professionals to the school environment would be an excellent strategy which would have a real impact on the problem addressed (Costa, Gomes, & Zancul, 2018).

In the context of the educational practices developed by academics, it is very important, because it awakens in the future health professionals the educating side, which is primordial for the action to promote the health of the community, since it is known that health education is a fundamental strategy to reduce the number of aggravations, hospitalizations, deaths, morbidities, mortality and high costs to the public system (Sardinha et al., 2019).

IV. FINAL CONSIDERATIONS

Thus, the child is a being in constant learning and must always be motivated to participate in the construction of this knowledge, with social institutions such as school and family working in an integrated manner and providing the appropriate tools for stimulation.

This experience gave the child the opportunity to participate in practical learning; experience activities within the classroom in relation to the topic addressed; seek to extend these habits beyond the school environment and evaluate learning through writing and drawing. The university and FHS facilitators were able to see that the problem seen from the community is more advantageous to work, because it reflects the real social need and generates a better response to society.

Thus, we suggest that the school approaches themes about the daily life of the student and strengthen the materialization through essays and drawings. In addition to encouraging debates on these topics among

students, they will be part of the construction of this knowledge.

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